## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 09 800 895 03.**81**\_01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
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t.	TOTAL CLAIMS	900					i i i
_			CONTRACTOR OF STREET		402157808A008872E		20 miles (1974)

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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